

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/732952	FILING DATE			
							APPLICANT(S)				
							CLAIMS				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/		/		/		51				
2	/	/					52				
3	/	/					53				
4	/	/					54				
5	/	/					55				
6	/	/					56				
7	/	/					57				
8	/	/	/		/		58				
9	/	/	/		/		59				
10	/	/	/		/		60				
11	/	/	/		/		61				
12	/	/	/		/		62				
13	/	/	/		/		63				
14	/	/	/		/		64				
15	/	/	/		/		65				
16	/	/	/		/		66				
17	/	/	/		/		67				
18	/	/	/		/		68				
19	/	/	/		/		69				
20	/	/	/		/		70				
21	/	/	/		/		71				
22	/	/	/		/		72				
23	/	/	/		/		73				
24	/	/	/		/		74				
25	/	/	/		/		75				
26	/	/	/		/		76				
27	/	/	/		/		77				
28	/	/	/		/		78				
29	/	/	/		/		79				
30	/	/	/		/		80				
31	/	/	/		/		81				
32	/	/	/		/		82				
33	/	/	/		/		83				
34	/	/	/		/		84				
35	/	/	/		/		85				
36	/	/	/		/		86				
37	/	/	/		/		87				
38	/	/	/		/		88				
39	/	/	/		/		89				
40	/	/	/		/		90				
41	/	/	/		/		91				
42	/	/	/		/		92				
43	/	/	/		/		93				
44	/	/	/		/		94				
45	/	/	/		/		95				
46	/	/	/		/		96				
47	/	/	/		/		97				
48	/	/	/		/		98				
49	/	/	/		/		99				
50	/	/	/		/		100				
TOTAL IND.	6		9		9		TOTAL IND.				
TOTAL DEP.	18		32		27		TOTAL DEP.				
TOTAL CLAIMS	24		36		36		TOTAL CLAIMS				

BEST AVAILABLE COPY

CLAIMS ONLY

SERIAL NO.

69/762952

FILING DATE

APPLICANT(S)

12/19/03

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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48						
49						
50						
TOTAL IND.	15					
TOTAL DEP.	27					
TOTAL CLAIMS	42					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS